

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755953

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** BELO HORIZONTE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6445 INDIAN CREEK DR  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

6445 INDIAN CREEK DR  
MIAMI BEACH, FL 33141

**New Mailing Address:**

**FEI Number:** 59-2098892

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MATERNO, LOURDES  
6445 INDIAN CREEK DR  
#202  
MIAMI BEACH, FL 33141 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GONZALEZ-CRUZ, LUIS  
Address: 6445 INDIAN CREEK #501  
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD  
Name: ALTMAN, LUZ  
Address: 6445 INDIAN CREEK SUITE 402  
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD  
Name: MATERNO, LOURDES  
Address: 6445 INDIAN CREEK DR #202  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VPD  
Name: MATERNO, CARLOS  
Address: 6445 INDIAN CREEK #202  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VPD  
Name: MARTINEZ, AGUSTIN  
Address: 6444 COLLINS AVENUE SUITE 303  
City-St-Zip: MIAMI BEACH, FL 33141

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOURDES MATERNO

PRES

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date